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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

Attorney Docket No. SCH-1704-D1

First Inventor Roman KOETITZ

Title PROCESS FOR DETECTING BINDING REACTIONS WITH
USE OF THE MEASUREMENT OF THE RELAXATION OF
THE DOUBLE REFRACTION OF MAGNETIC PARTICLES

Express Mail Label No.

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. Applicant claims small entity status.
See 37 CFR 1.27.
3. Specification [Total Pages 26]
(preferred arrangement set forth below)
 - Descriptive title of the Invention
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. Drawing(s) (35 U.S.C. 113) [Total Sheets 6]
5. Oath or Declaration [Total Pages 153]
 - a. Newly executed (original or copy)
 - b. Copy from a prior application (37 CFR 1.63 (d))
(for a continuation/divisional with Box 18 completed)
 - i. DELETION OF INVENTOR(S)
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. Application Data Sheet. See 37 CFR 1.76

ADDRESS TO: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
 - a. Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. CD-ROM or CD-R (2 copies); or
 - ii. paper
 - c. Statements verifying identity of above copies

ACCOMPANYING APPLICATIONS PARTS

9. Assignment Papers (cover sheet & document(s))
10. 37 C.F.R. §3.73(b) Statement Power of Attorney (when there is an assignee)
11. English Translation Document (if applicable)
12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations
13. Preliminary Amendment
14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
15. Certified Copy of Priority Document(s) (if foreign priority is claimed)
16. Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. Other: _____

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation Divisional Continuation-in-part (CIP)

of prior application No: 09/631,630 filed August 4, 2000

Prior application information: Examiner Pensee T. Do

Group / Art Unit: 1641

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

 Customer Number or Bar Code Label

23599

or Correspondence address below

Name				
Address				
City	State		Zip Code	
Country	Telephone		Fax	

Name (Print/Type)	Csaba Henter	Registration No. (Attorney/Agent)	50,908
Signature			Date

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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13201
U.S.P.T.O.
031004

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 770.00)

Complete if Known	
Application Number	Unassigned
Filing Date	March 10, 2004
First Named Inventor	Roman KOETITZ
Examiner Name	Pensee T. Do
Group / Art Unit	1641
Attorney Docket No.	SCH-1704-D1

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number: 13-3402

Deposit Account Name: Millen, White, Zelano & Branigan, P.C.

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed:

Check Credit card Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 375	Utility filing fee	770.00
1002 340	2002 165	Design filing fee	
1003 530	2003 260	Plant filing fee	
1004 770	2004 375	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1)			(\$ 770.00)

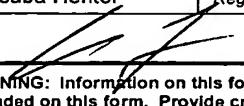
2. EXTRA CLAIM FEES

Total Claims	-20**	=	0	X	18	=	0	Extra Claims	Fee from below	Fee Paid
Independent Claims	3	-3**	=	0	X	86	=	0		
Multiple Dependent				X			=	0		

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 86	2201 42	Independent claims in excess of 3
1203 280	2203 140	Multiple dependent claim, if not paid
1204 84	2204 42	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)		(\$0)

**or number previously paid, if greater; For Reissues, see above

3. ADDITIONAL FEES	
Large Entity Fee Code (\$)	Small Entity Fee Code (\$)
1051 130	2051 65
1052 50	2052 25
1053 130	1053 130
1812 2,520	1812 2,520
1804 920*	1804 920*
1805 1,840*	1805 1,840*
1251 110	2251 55
1252 410	2252 205
1253 930	2253 465
1254 1,450	2254 725
1255 1,970	2255 985
1401 320	2401 160
1402 320	2402 160
1403 280	2403 140
1451 1,510	1451 1,510
1452 110	2452 55
1453 1,300	2453 650
142 1,300	242 650
1502 470	2502 235
1503 630	2503 315
1460 130	1460 130
1807 130	1807 130
1806 180	1806 180
8021 40	8021 40
1809 750	2809 375
1810 750	2810 375
1801 750	2801 375
1802 900	1802 900
Other fee (specify) _____	
*Reduced by Basic Filing Fee Paid	
SUBTOTAL (3) (\$ 0)	

SUBMITTED BY					
Complete if applicable					
Name (Print/Type)	Csaba Henter	Registration No. Attorney/Agent)	50,908	Telephone	(703) 243-6333
Signature				Date	March 10, 2004

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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